DOCUMENT RESUME

ED 475 891 CG 032 364

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TITLE	Residential Substance Abuse Treatment for State Prisoners: Breaking the Drug-Crime Cycle among Parole Violators.
INSTITUTION	Department of Justice, Washington, DC. National Inst. of Justice.
REPORT NO	NIJ-199948
PUB DATE	2003-05-00
NOTE	13p.; A web-only document.
AVAILABLE FROM	For full text: http://www.ncjrs.org/pdffiles1/nij/199948.pdf.
PUB TYPE	Reports - Evaluative (142)
EDRS PRICE	EDRS Price MF01/PC01 Plus Postage.
DESCRIPTORS	Correctional Institutions; *Correctional Rehabilitation; *Outcomes of Treatment; *Prisoners; *Program Evaluation; Recidivism; Residential Programs; *Substance Abuse
IDENTIFIERS	Idaho

ABSTRACT

This Research for Practice examines the Residential Substance Abuse Treatment (RSAT) program at the South Idaho Correctional Institution. The program targets parole-violating inmates with substance abuse problems in an effort to reduce recidivism. Researchers conducted a 15-month evaluation of the program's process to identify strengths and weaknesses. Evaluators found Idaho's RSAT program succeeds in part because it combines the most successful known substance abuse treatment approaches used in correctional facilities: a strict process for screening potential participants; the establishment of a therapeutic community; a combination of treatment types--cognitive self-change and behavioral strategies and a 12-step program; the intense involvement of inmates in their own problem solving and development; and an emphasis on the need for a structured aftercare component. Evaluators observed that program participants seemed to have developed prosocial attitudes after participation in the program, and they speculated that the program would likely reduce incarceration costs. These findings may be instructional for other correctional facilities grappling with similar problems. (GCP)

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Research for Practice

Residential Substance Abuse Treatment for State Prisoners

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Breaking the Drug-Crime Cycle Among Parole Violators

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Residential Substance Abuse Treatment for State Prisoners

Breaking the Drug-Crime Cycle Among Parole Violators

By Mary K. Stohr, Craig Hemmens, Diane Baune, Jed Dayley, Mark Gornik, Kirstin Kjaer, and Cindy Noon

May 2003

NCJ 199948

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The National Institute of Justice is a component of the Office of Justice Programs, which also includes the Bureau of Justice Assistance, the Bureau of Justice Statistics, the Office of Juvenile Justice and Delinquency Prevention, and the Office for Victims of Crime.

About This Report

Idaho has found a way to deal with the many parolees who are returned to prison because their abuse of alcohol and drugs contributes to their committing a new offense. To break this drug-crime nexus, the Residential Substance Abuse Treatment (RSAT) program at the South Idaho Correctional Institution began to target parole-violating inmates with substance abuse problems. To identify the program's strengths and weaknesses, researchers conducted a 15-month evaluation of the program's process. The evaluation identified several "do's" and "don'ts" that may be instructional for other correctional facilities grappling with similar problems.

What did the study find?

Evaluators found Idaho's RSAT program succeeds in part because it combines the most successful known substance abuse treatment approaches used in correctional facilities:

- A strict process for screening potential participants.
- The establishment of a therapeutic community.
- A combination of treatment types—

  1. Cognitive self-change and behavioral strategies.
  2. A 12-step program.

- The intense involvement of inmates in their own problem solving and development.
- An emphasis on the need for a structured aftercare component.

Evaluators observed that program participants seemed to have developed prosocial attitudes after participation in the program, and they speculated that the program would likely reduce incarceration costs. However, they did not measure the program's impact on recidivism and incarceration costs.

The evaluators noted some program weaknesses and suggested the following improvements:

- Expand training for treatment providers and correctional staff.
- Increase salaries for treatment personnel so that pay is commensurate with qualifications and skills.

- Consistently maintain accurate, complete, and up-to-date client program records, especially data on referral decisions and justifications.

- Improve opportunities for interaction between counselors and correctional officers to encourage positive communications.

What were the study's limitations?

The program's participant population, like Idaho's general population, was overwhelmingly white and non-Hispanic. As a result, findings may not apply to a different population base. In addition, some staff surveys were incomplete, and pretesting was either not carried out or records of some were not maintained.

Who should read this study?

Evaluation researchers, substance abuse treatment providers, and correctional administrators.

Residential Substance Abuse Treatment for State Prisoners: Breaking the Drug-Crime Cycle Among Parole Violators

The link between drug abuse and crime is well documented. Substance abuse is implicated in the incarceration of the majority of persons jailed or imprisoned in the United States.[1] Idaho's inmate population is not an exception.[2]

To help break the drug-crime connection, the South Idaho Correctional Institution took the unprecedented step of targeting parole-violator inmates for participation in its Residential Substance Abuse Treatment (RSAT) program (see "What Is RSAT?") in May 1997. Two years later, researchers began a 15-month process evaluation of the program's operations. Their goal was to assess the RSAT program's strengths and weaknesses so that its best attributes might be applied by correctional administrators elsewhere. (See "Evaluation Methodology.") Among the evaluation's findings:

- Idaho's RSAT program largely conforms to what is known to be the most successful substance abuse treatment in correctional institutions.
- The Idaho RSAT program's content and delivery of services are substantively and operationally sound.
- Participants generally develop more prosocial attitudes after involvement in the Idaho RSAT program.

Program Strengths

Details supporting the evaluation's findings may prove valuable to correctional institutions that are interested in starting a residential treatment program or to those that have programs already in place. The balance of this Brief outlines evaluation-identified strengths of Idaho's program, discusses program performance, and provides evaluators' suggestions for making what was judged a sound program even better.

Idaho's RSAT program involves an intensive 9- to 12-month treatment regimen for chronic substance abusers. Alcohol/drug treatment delivered by a private contract provider addresses both addiction and criminality. Parole violators who successfully complete the program will likely be re-released at an earlier date than those who did not participate. Among the program's strengths are a strict process for screening potential participants and the use of a combination of treatment approaches.

Screening potential participants

Parole officers and parole commission hearing officers jointly recommend offenders to the program if they are relatively low-risk parole violators with chronic substance abuse problems and have at least 18 months to serve on their sentences. Favored candidates also tend to have positive attitudes toward treatment and adequate potential to obtain resources after release.

A treatment team makes the final selection after reviewing recommendations, administering a substance-abuse assessment instrument, and interviewing candidates face to face. The absence of rigorous screening can lead to disciplinary problems, which occurred early in the program before screening procedures were tightened.

Treating selected parolees

Idaho's RSAT program reflects what is regarded as the most successful substance abuse treatment in correctional institutions. Specifically, treatment is conducted in a therapeutic community,

What Is RSAT?

The federally funded Residential Substance Abuse Treatment (RSAT) for State Prisoners Formula Grant Program awards grants to help States develop, implement, and improve residential substance abuse programs in correctional facilities. Created by the Violent Crime Control and Law Enforcement Act of 1994, the RSAT program funds up to 75 percent of a project's total costs, with a requisite 25-percent cash match. Qualifying projects must provide both individual and group treatment activities for offenders in residential facilities in addition to meeting the following qualifications:

- Participants must be set apart from the general population of the correctional facility, either in a separate location or in a dedicated housing unit within a facility.
- The project must focus on substance abuse problems.
- The duration of the project should range from 6 to 12 months.
- Activities should develop cognitive, behavioral, social, vocational, and other skills that inmates can use to handle substance abuse and its related problems.
- States must require urinalysis or another reliable method of drug and alcohol testing of all participating inmates, including those who have been released from the RSAT program but who remain in the State's custody.
- Program staff must work with community-based substance abuse treatment programs to place program participants in appropriate ongoing substance abuse treatment when they are released or paroled. The agencies should work together to develop a plan that meets the individual's needs, including mental health treatment, if needed.
- The RSAT program should work with other local human services and rehabilitation programs, as needed, on such aftercare services as education and job training. However, grant funds may be used only for residential treatment.

employs cognitive self-change and behavioral strategies, includes a 12-step program, involves inmates intensively in their own problem solving and development, and stresses the importance of having a structured aftercare component.

Therapeutic community. A therapeutic community resides within prison confines; it can provide individuals with the strength, support, and insight to make needed changes that would be more difficult to achieve on their own. The community environment enables its members to fight a common enemy (an addictive and criminal lifestyle) and reach a common goal (new ways of "right living").

Cognitive self-change and behavioral strategies. This treatment component helps inmates consider thinking errors that lead to substance abuse and criminal behavior and provides the means by which they can proceed along a less destructive path. Inmates are taught how to better understand the connections among thinking, behavior, and consequences. They practice techniques designed to promote prosocial thought processes; prepare "thinking reports" to objectively identify thoughts and feelings associated with high-risk behavior in given situations; and document their personal thinking process, behavior, and motivations in a journal. Staff and inmates periodically review the thinking reports and journals to gauge treatment progress.

12-step program. Central to the Idaho regimen is a 12-step program (Minnesota Model of Chemical Dependency) that uses the group process and employs recovering alcoholics and addicts as counselors. It also emphasizes individual counseling by professional staff, lectures, group reading, life history work, Alcoholics Anonymous (AA) and/or Narcotics Anonymous (NA) attendance, and recreational and physical activity. AA and NA principles are regarded as fundamental to recovery.

Client involvement. Inmates' involvement in their own rehabilitation is regarded as necessary for success. They select their own leaders or coordinators, engage in problem solving related to their high-risk behaviors, and maintain community and program integrity by encouraging or discouraging specific behaviors by group members.

Aftercare. At the time of its evaluation, the Idaho RSAT program was solidifying development of an aftercare program that would provide RSAT graduates with continued care after their release on parole. Aftercare is widely regarded as a means of ensuring a more prosocial transition for offenders.

Program Performance

Evaluators judged the program's procedures for screening potential participants to be effective. These procedures require recommendations from parole officers, revocation hearing officers, and program and prison staff, as well as assessment and interviews. Those who entered the program

had substance abuse problems sufficient to warrant placement in an intensive treatment environment.

Researchers found that program participants had more prosocial attitudes after finishing treatment than before they began. This is seen as an intermediate measure of achievement, a step toward the program's ultimate goal of reducing recidivism. Participants were tested at the beginning of the program and 3 months later. Their scores show they understood and retained course material and, thus, received appropriate instruction.

Other facets of program performance were gleaned from responses to a 51-item questionnaire by 42 participating inmates.

Participant opinions and comments

Like the Idaho population generally, the inmates who responded were overwhelmingly white and non-Hispanic. They ranged in age from 20 to 50; almost half were between the ages of 20 and 29. About three-quarters had no more than a high school diploma. None held a 4-year college degree.

Participants most commonly listed program strengths as follows:

- NA and AA meetings.
- Counselors.
- Feelings of fellowship among community members.
- The support system.
- The therapeutic community atmosphere.

The most commonly listed program weaknesses were:

- The presence of inmates who retaliated against others.
- The relatively open location of the therapeutic community within the prison.
- Petty requirements and rules.
- Poor instruction in cognitive self-change.

Staff opinions and comments

Another questionnaire elicited views of program performance from 43 staff members whose jobs were about evenly split between security and nonsecurity positions.

On average, staff members were 15 years older than RSAT inmates. Most were white, male, noncollege graduates, and on the job for fewer than 3 months (suggesting high turnover). The surveyed staff members held generally positive views of program content and delivery, including staff preparation, inmate involvement, consistency of delivery and communication, and staff helpfulness and supportiveness. They believed that inmates gained valuable information and skills.

Detailed interviews with 10 staff members found that most considered the program to have:

- Exceptional content.
- Qualified staff.
- An open and professional therapeutic community atmosphere.
- Productive communication between custody and treatment staff.

Evaluation Methodology

Questions focused on determining whether the program delivery—

- Matched its stated goals and objectives.
- Used components consistent with successes identified in the literature.
- Addressed the target population.
- Seemed likely to result in reduced recidivism and costs.
- Appeared likely to result in measurably greater behavioral changes.
- Allowed for the conduct of an outcome evaluation.
- Faced any communication or implementation barriers.
- Might be enhanced by the development of cooperative remedies to address barriers.

To find the answers to these questions, researchers—

- Conducted random and frequent program observation visits.
- Reviewed manuals, policies, procedures, staff training, inmate assessment, and intake and exit instruments, and reviewed data from the inmate management system, resources devoted to the program, and aftercare procedures.
- Analyzed outcomes from assessments performed by the Idaho Department of Correction and the treatment provider.
- Interviewed key personnel and conducted separate surveys of staff and inmates on their perceptions of and satisfaction with program success.

- Adequate aftercare plans.
- Individualized treatment plans.
- Beneficial repetition within the program.

Staff concerns included the lack of fully trained treatment staff in the areas of cognitive self-change and operation of a therapeutic community, insufficient information sharing between custody and treatment staff, and challenges to the ability of inmate participants to finish the program posed by contact with non-RSAT inmates.

Program Improvements

The Idaho RSAT evaluation team's review will add to the growing list of lessons learned about correctional substance abuse programming, thereby benefiting the corrections community generally. In that context, a number of suggestions are offered to improve Idaho's already strong program:

- Add to the cognitive self-change and therapeutic community training provided to both the treatment providers and correctional staff. Continue quarterly meetings that involve all participants.
- Improve retention of treatment personnel by paying them in a manner commensurate with their qualifications and skills.
- Include program components on anger management, relationship management, parenting, and dealing with sexual abuse and provide aftercare for inmates on a statewide basis. Add "trust-building" exercises for program participants.
- Add meetings, training sessions, and even social events to enhance positive communication and interaction between counselors and correctional officers.
- Move the program to more isolated quarters, use softer and less institutional furnishings and paint, establish a resource library, and allow informal gatherings in a common area. These changes will convey the message that participants are in a community- and treatment-oriented environment as well as a correctional one.
- Consistently maintain inmate data files, including decisions and justifications regarding referrals of parole violators to the program. Such records support ongoing analysis of all aspects of the program, including a recommended outcome evaluation.

As of March 2000, 86 inmates had completed the program. Of these, 51 percent (44) were on parole and 37 percent (32) had violated parole, most within 180 days.[3]

The research team believes that the Idaho RSAT program, even without improvements, is likely to result in less recidivism in program graduates and, therefore, less cost for tax payers. It feels the time is ripe to implement an outcome evaluation to test this belief.

Notes

1. For example, see National Center on Addiction and Substance Abuse, *Behind Bars: Substance Abuse and America's Prison Population*, New York: National Center on Addiction and Substance Abuse at Columbia University, January 1998. Drug and alcohol abuse and addiction were implicated in the crimes and incarceration of 80 percent of inmates in State and Federal prisons and local jails at the end of 1996. The percentage was reduced to about 70 percent when dealers who did not use drugs were excluded. The study reports that criminal recidivism is very much a function of drug and alcohol abuse. Forty-one percent of first-time offenders and 81 percent of offenders with five or more prior convictions have a history of regular drug use.

2. The Idaho Department of Correction surveyed 1,139 inmates between 1993 and 1994. At the time of the inmates' offenses, 67 percent had been using drugs or alcohol; 10 percent were using both. See Cardenas, Eric D., *An Evaluation of the Implementation, Administration and Impact of the "Residential Substance Abuse Treatment Program" at South Idaho Correctional Institution*, Boise: Idaho Department of Correction, 1996.

3. Ten of the 86 inmates who completed the RSAT program were classified as neither on parole nor in violation of parole.

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